

State of Connecticut  
Office of the Secretary of the State  
Election Services Division

PREScribed FORM FOR RETURN OF VOTES CAST AT A STATE PRIMARY  
(C.G.S. §9-440 and §9-314(b))

Head moderator, or moderator in municipalities with only a single voting district, to complete, sign, and forthwith transmit one copy of this return, **BY FAX and MAIL** or by hand delivery, to **SECRETARY OF THE STATE**, Election Services Division, 30 Trinity Street, P.O. Box 150470, Hartford, CT 06115-0470. Use additional pages, if necessary. A duplicate return is to be filed with the municipal clerk.

City  
Town of FARMINGTON

Date of Primary: August 12, 2014

Party: X REPUBLICAN

Part I - Candidates

Office or Position Designation  
(from ballot,  
including political  
subdivision, if  
applicable--e.g.,  
Assembly District,  
Ward, etc.)

Candidate  
(from ballot)

Number of  
Votes Received

GOVERNOR\	THOMAS C FOLEY	<u>598</u>
GOVERNOR	JOHN P McKINNEY	<u>408</u>
LIEUTENANT GOVERNOR	PENNY BACCHIOCHI	<u>275</u>
LIEUTENANT GOVERNOR	HEATHER SOMERS	<u>322</u>
LIEUTENANT GOVERNOR	DAVID M WALKER	<u>390</u>
COMPtROLLER	SHARON J McLAUGHLIN	<u>728</u>
COMPtROLLER	ANGEL CADENA	<u>157</u>

Part I - Continued

Office or Position Designation  
(from ballot,  
including political  
subdivision, if  
applicable--e.g.,  
Assembly District,  
Ward, etc.)

Candidate  
(from ballot)

Number of  
Votes Received

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Part II - Official Check List Report

	A. Total number of names on official check list (include only the active enrollment list and names restored to it on primary day):	B. Total number of names <u>checked</u> as having voted, by machine <u>and</u> by absentee ballot (as <u>counted</u> on official check list):
1. Entire Municipality: (Town, Borough, City)	4360	1011
2. Political Subdivision if applicable (e.g., Assembly District, Ward, etc.):	A. Total number of names on official check list (include only the active enrollment list and names restored to it on primary day):	B. Total number of names <u>checked</u> as having voted, by machine <u>and</u> by absentee ballot (as <u>counted</u> on official check LIST)
01-14 IRVING ROBBINS	1595	368
01-05 WEST WOODS	398	94
02-06 COMMUNITY CENTER	1256	295
02-07 MUNICIPAL/LIBRARY	1111	254

I hereby certify that the foregoing are the returns of the primary of the above-named party in the above-named municipality, legally warned and held on 8-12-2014.

SIGN HERE: X Robert J. Bonato  
ROBERT BONATO

08-12-2014  
Date

X Head Moderator

Head Moderator's/ Moderator's Telephone Numbers:  
860-673-5251  
( Home )